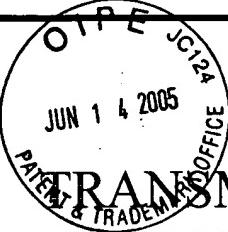


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FORM**

TRANSMITTAL FORM JUN 14 2005 06-(S-W)	Application Serial Number	09/685,924
	Filing Date	October 10, 2000
	First Named Inventor	Hsu
	Group Art Unit	3621
	Examiner Name	John W. Hayes
	Attorney Docket No.	74622-007
	Patent No.	Not yet assigned
	Issue Date	Not yet assigned

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form 	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)	<input type="checkbox"/> Request for Certificate of Correction <ul style="list-style-type: none"> <input type="checkbox"/> Certificate of Correction (in duplicate)
<input checked="" type="checkbox"/> Response to Final Office Action (2 pgs) <ul style="list-style-type: none"> <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings <p>[Total Sheets _____]</p>	<input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences
<input checked="" type="checkbox"/> Petition for Extension of Time (2 month) (1 pg)	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal	<input type="checkbox"/> Appeal Brief (in triplicate)
<input type="checkbox"/> Information Disclosure Statement <ul style="list-style-type: none"> <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations 	<input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)	<input type="checkbox"/> Status Inquiry
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Sequence Listing submission <ul style="list-style-type: none"> <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above 	<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below)
	<input type="checkbox"/> Small Entity Statement	<input checked="" type="checkbox"/> Copy of Petition for Extension of Time (2 month) (1 pg).
	<input type="checkbox"/> CD(s) for large table or computer program	From Combined Application: <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Copy of Combined Application including figures (100 pgs); <input checked="" type="checkbox"/> Copy of Postcard (1 pg); <input checked="" type="checkbox"/> Copy of Utility Patent Application Transmittal Form (1 pg); <input checked="" type="checkbox"/> Copy of Fee Transmittal Forms (2 pgs); <input checked="" type="checkbox"/> Copy of Application Data Sheet (3 pgs); <input checked="" type="checkbox"/> Copy of Express Mail Mailing Label (1 pg).

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this _____ day of _____, 2005.

CORRESPONDENCE ADDRESS <p>Direct all correspondence to:</p> <p>Patent Administrator Proskauer Rose LLP One International Place 22nd Floor Boston, MA 02110-2600 Tel. No.: (617) 526-9600 Fax No.: (617) 526-9899</p>	SIGNATURE BLOCK <p align="right">Respectfully submitted,</p> <p align="right"></p> <p align="right">Christopher H. Chung Attorney for the Applicant(s) Proskauer Rose LLP One International Place 22nd Floor Boston, MA 02110-2600</p>
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